

would refer you to a paper recently published in the *British Medical Journal*, by C. O. Hawthorne, "A Clinical Study of Thirty Cases of Locomotor Ataxia." He says: "A step forward in our knowledge . . . of locomotor ataxia has been the recognition of the fact that ocular disturbance may precede the evidence of any spinal lesion;" and again, "the cases may be held to justify the view that an optic nerve atrophy, an ocular paralysis, or the Argyll Robertson pupil, must be regarded as affording a definite basis of suspicion . . . of locomotor ataxia." In view of what has been said, I think we may fairly admit that the eye symptoms will, in many cases, most materially assist in the early recognition of locomotor ataxia; but in order to this, these symptoms must be fully understood, carefully examined, and their indications never neglected. How often, in former years, has a patient perhaps casually mentioned to his physician that he had a squint, and had double vision for a couple of weeks, but it passed away, and he thought little of it. Or that he had drooping of one of his eyelids; or that his sight had failed unaccountably of late? Any such statements now would rouse in the mind of the physician the gravest suspicions; he would look upon them as danger signals, and would act accordingly.

In endeavoring to sum up this matter, I would emphasize the following points:

1. The extreme importance of the early recognition and treatment of tabes.
2. That the eye symptoms, in a certain number of cases, precede all the others.
3. That if, especially in an adult male patient, any one of the ocular symptoms be discovered, the case should be thoroughly investigated, even if no other symptom be discerned, and kept under observation until clearly understood.
4. But that if, in the course of such investigation, even our other ocular symptoms be found, the case is probably one of locomotor ataxia.
5. That if such a case be left untreated, ataxia may be expected to appear after a longer or shorter time; but, if treatment be instituted, the patient may remain in the pre-ataxic stage, and continue to be a useful member of society.